Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	ion	20120	0302			Repo Filed		CAND	IDATE	√	CC	OMMITTE	E	LOBI	BYIST		
Name of Filing C	Committee, C	Candida	ite or Lo	obbyist:	I	Bryan	Cutler			-							
Street Address:																	
City:								State:	Zip Code: 17563-9641								
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY					POST-				AMENDMENT REPORT?		No	· ·	\checkmark
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA ELECTION	ND FRIDAY PRE- LECTION 5. 30				POST-	6.)	K	TERMINATION REPORT?		Yes	No	,	\checkmark
report type)	ANNUAL RE	PORT	7.	Year 2012				NG METH CHECK C				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Ca	andidat	e:				-	DATE	OF ELE	CTI	ON	District Number	Office Code	Par	ty Code	Coun Code	
REPRESENTATI		GENER		EMBI V				мо	DAY	١	/EAR	100	STH	REP		36	
REFRESENTATI		GLNLN	AL ASSI					1	L	6	2012]	(SEE INS	TRUCTI	ONS FOR	CODES	,
Summary of		and	мо	DAY	YEAR	1		мо	DAY	١	YEAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		1	10 23	20	012	ГО	1	1	26	2012						
A. Amount Bro	ught Forwar	rd From	Last R	eport			\$	5			0.00						
B. Total Monet	ary Contribu	itions A	nd Reco	eipts (From	Sche	dule I)	\$	5			0.00						
C. Total Funds	Available (S	Sum Of	Lines A	and B)			\$	5			0.00						
D. Total Expen	ditures (Fro	m Sche	dule II	[)			\$	5			0.00]					
E. Ending Cash	Balance (Su	ubtract	Line D	From Line	C)			5			0.00						
F. Value Of In-	Kind Contrib	outions	Receive	ed (From S	chedu	le II)	4	5			0.00						
G. Unpaid Deb	ts And Oblig	ations((From S	chedule IV	')		4	5			0.00		,				
					AFF	IDAV	IT SE	ECTION									
PART I - If this is																	
I swear (or affirm) correct and comple		ort, inclu	iding the	attached scl	hedules	s filed or	1 paper	or by elec	tronic n	nediu	m, are to	the best of	f my know	ledge	and beli	ef , tru	ле [,]
Sworn to and subs	cribed before day of	me this		20							Signatur	e of Persor	n Submitti	ing Rep	ort		-
		Signatur	e				_					Print	ted Name				-
My Commission Ex	xpires											Emai	I				_
	мо)	DA	AY	YR				Α	rea Co	ode	Daytim	e Telepho	one Nu	mber		
Part II- If this is	-								-								
I swear (or affirm) No 320) as amendo		est of m	y knowle	dge and beli	ef this	politica	l comn	nittee has	not viola	ated a	any provis	ions of the	e act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before n day of	ne this		20							S	ignature o	of Candida	te			-
							_		Printed Name								-
	-	nature					_							_			
My Commission Exp	bires											Emai					
		мо	D/	AY	YR		_		Area Code Daytime Telephone Number								

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>10/23/2012</u> **To:** Bryan Cutler 11/26/2012 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	•)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00		

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)											
Name of Filing Committee or Candida	te			oorting P	eriod						
			Fro	m:		Тс):				
					DATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address		-					\$	0.00			
City	State	Zip Code (Plus 4)								
								PAGE TOTAL			
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00											

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period						
			From:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00	
Mailing Address							7 *	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00	

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate Re				eporting Period					
			Froi	n:		Т):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Report	ing Peric	d			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description	·							
		_	.				PAGE TOT	AL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$	0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
Bryan Cutler	From:	<u>10/23/2012</u> To:	<u>11/26/2012</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
				m:		То:				
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor		•		Occupa	ation					
Employer Mailing Address/Principal Place of Business City					Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00					

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
				From					
		DATE		AMOUNT					
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)				Description of Expenditure					
Enter Crand Tatal of Evnanditures	an Dago 1. Donort (Cover Dage Item I					PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00		